



**Royal Devon
University Healthcare**
NHS Foundation Trust

JOB DESCRIPTION

Specialty Doctor in Acute Paediatrics

1. INTRODUCTION

This is a new substantive 8PA role within the Paediatric team based at the Wonford Hospital site in Exeter. The post holder will support the development of a Paediatrics Rapid Access Clinic (RAC) to improve urgent and emergency care offered to children who attend the Emergency Department or are referred to Paediatrics by Primary Care. The clinical role includes the delivery of twice weekly Rapid Access Clinics, contribution to the senior Paediatric Assessment Unit (PAU) rota during the week and at weekends, and non-urgent child protection medical assessments. The post holder will play a key role in developing the RAC service, including guidance and pathways needed to improve the care that is provided for children with acute presentations. They will be supported by the Paediatrics Consultants and the Management team in order to establish the RAC model.

2. HOSPITALS AND SERVICES

Royal Devon was established in April 2022 bringing together the expertise of both the Royal Devon and Exeter NHS Foundation Trust and Northern Devon Healthcare NHS Trust. Stretching across North, East and Mid Devon including Torridge and Exeter, our workforce of over 17,000 staff serves a population of almost one million people, extending our reach as far as Cornwall and the Isles of Scilly.

We deliver a wide range of emergency, specialist and general medical services through North Devon District Hospital and Wonford Hospital. Alongside our two acute hospitals, we provide integrated health and social care services across a variety of settings including community inpatient hospitals, outpatient clinics, and within people's own homes. We also offer primary care services, a range of specialist community services, and Sexual Assault Referral Centres (SARC). Our hospitals are both renowned for their research, innovation and links to universities.

Royal Devon Eastern Services are managed day-to-day by a Trust Executive which includes a Medical Director, two Deputy Medical Directors, three Associate Medical Directors (with management contracts), a Chief Executive, and (ex officio) the Chairman of the Medical Staff Committee. There is a Medical Staff Committee of which all consultants in the Trust are members. The Medical Staff Committee chair also chairs the consultant senate which is attended by consultants who are nominated by and represent all the clinical departments.

3. THE WORK OF THE DEPARTMENT AND DIVISION

Child Health in Exeter is part of the Women's and Children's Health Care Group. The Associate Medical Director for the Care Group is Dr Georgina Hands. Clinical Director for Paediatrics is Dr Simon Parke, Clinical Lead for Acute Paediatrics is Dr JP Smith and the Clinical Leads for Community Child Health are Dr Leighton Phillips and Dr Eleanor Thomas.

The Child Health department comprises Acute Paediatrics and Community Child Health. Nursing services are led by Victoria Smith, Lead nurse for children and Tom Johnson, Clinical Matron. Business management is provided by Natalie Wickins, Care Group Director and Jasmine Hughes, Cluster Manager.

The principle of provision of paediatric care in Exeter has been that each of the consultant paediatricians has remained a generalist while developing one or more special interests.

The following tables show details of the consultants and speciality doctors currently in post.

| Name | NHS sessions | Main description of post | Special interest & responsibilities |
|------------------------|--------------|--|--|
| Dr Chris Moudiotis | FT | Acute Paediatrics | Diabetes / Endocrinology |
| Dr Richard Tomlinson | FT | Community Child Health & Acute Paediatrics | Neurodisability, Acute General Paeds, MyCare |
| Dr Rachel Howells | FT | Acute Paediatrics | Neurology / Epilepsy Lead for Medical Appraisal Named Doctor for Safeguarding / Devon CCG (Exeter) |
| Prof Stuart Logan | LTFT | Outpatient Paediatrics | Epidemiology Evidence Based Practice |
| Dr Corinne Hayes | FT | Acute Paediatrics | Paediatric Oncology, Hearing Impairment |
| Dr Simon Parke | FT | Acute Paediatrics | Paediatric Oncology, Benign Haematology Clinical Director Paediatrics |
| Dr Rebecca Franklin | LTFT | Acute Paediatrics | ED liaison Immunology and infectious diseases |
| Dr Beth Enderby | FT | Acute Paediatrics | Respiratory, Cystic Fibrosis |
| Dr Emily Bell | LTFT | Acute Paediatrics | Respiratory, Cystic Fibrosis |
| Dr Hannah Cottis | LTFT | Acute Paediatrics | Nephrology UEMS lead |
| Dr Sian Ludman | LTFT | Acute Paediatrics | Allergy & Immunology |
| Prof. David Mabin | FT | Neonatology Cardiology | Neonatology, Cardiology Associate Clinical Dean UEMS |
| Dr James Hart | FT | Acute Paediatrics & Neonatology | Gastroenterology, Metabolic disorders Neonatology |
| Dr Nigel Osborne | LTFT | Acute Paediatrics | Cardiology |
| Dr David Bartle | FT | Neonatology & Acute Paediatrics | Peninsula deanery programme director ST4 - 8 and Trust Simulation Lead |
| Dr Nagendra Venkata | FT | Neonatology & Acute Paediatrics | Cardiology, Neurodevelopment |
| Dr David McGregor | FT | Neonatology & Acute Paediatrics | Diabetes and Endocrinology |
| Dr Nicola O'Shea | LTFT | Neonatology & Acute Paediatrics | Neonatology Neurodevelopment Neonatal Clinical lead |
| Dr Helen Brewer | LTFT | Community Child Health | Community Child Health, Neurodisability |
| Dr Eleanor Thomas | LTFT | Community Child Health | Community Child Health, Neurodisability Designated doctor for Child Death Review Community Paediatrics Lead |
| Dr Leighton Phillips | LTFT | Community Child Health | Community Child Health, Neurodisability, Children in Care, Designated Doctor CIC Community Paediatrics Lead |
| Dr. Rowan Stanbury | LTFT | Community Child Health & Acute Paediatrics | Community Child Health, Neurodisability, Acute General Paeds College Tutor |
| Dr. JP Smith | FT | Acute Paediatrics | Named Doctor for Safeguarding Rheumatology Acute Paediatrics Lead |
| Dr. Christine McMillan | FT | Acute Paediatrics | Gastroenterology |
| Dr. Emily Chesshyre | LTFT | Acute Paediatrics | Infectious diseases |
| Dr Harriet Aughey | LTFT | Neonatology & Acute Paediatrics | Neonatology |
| Dr Gillian Forward | LTFT | Neonatology & Acute Paediatrics | Neonatology |

| Staff Grade, Specialty Doctors, Specialists & Associate Specialists | | |
|--|--|---------------------------------------|
| Dr Rachel Elderkin | General Paediatrics & PAU | Cystic Fibrosis Hearing Impairment |
| Dr Susan Hellewell | General Paediatrics & PAU | Diabetes |
| Dr Jess Pales | General Paediatrics & PAU | Adolescent health |
| Dr Rachel Wajed | Oncology | |
| Dr Jane Dunlop | Community Child Health, Neurodisability | CCG Designated Doctor for SEND |
| Dr Clare Howard | Community Child Health, Neurodisability | |

Acute Paediatrics

Bramble Ward in Wonford Hospital is staffed for 30 children's inpatient beds to provide for all children in the district. Included in this is the Paediatric High Dependency Unit (PHDU), which consists of a three-bedded bay and an isolation cubicle. In addition, Bramble has a 6-bedded bay for surgical daycase and a 5-bedded bay for ambulatory daycases. There is also a 5-bed paediatric oncology day case unit and a 6-space Paediatric Assessment Unit located beside ED. Bramble is situated adjacent to the emergency medicine and X-ray departments with the intensive care unit and main theatres above.

The paediatric outpatient suite adjoins Bramble ward and has seven large consulting rooms and its own paediatric waiting area with specially-designed play facilities. There are additional outpatient facilities at Heavitree Hospital where the department of clinical genetics is situated.

Paediatric intensive care is provided jointly with the anaesthetists in the general ITU where there is a designated paediatric cubicle. Exeter is one of three units providing Level 2 PICU in the region. All cases are discussed with specialists of the regional unit in Bristol who undertake retrieval if appropriate. The 4-bedded PHDU facility on Bramble ward provides non-invasive respiratory support (including high flow humidified oxygen and CPAP) and elective complex post-operative surgery care (including spinal, orthopaedic and thoracic surgery).

The consultant neonatal and general paediatric rotas are separate so there is 24 hour dedicated consultant cover for both general paediatrics and neonatology. All consultants with acute responsibilities participate in the admission arrangements and provide consultant cover for the unit when on service or when on-call. Current arrangements have a 7 day a week Consultant-led general paediatric ward round with junior doctor support.

Acute assessment of children with suspected non-accidental injuries and necessary acute liaison with partner agencies forms part of the responsibilities of the on-call team. The department has a vision to work towards a separate child protection rota. Child sexual abuse services in the absence of acute physical injury are provided out of Wonford Hospital.

While all the consultants take general paediatric cases, they each have special interests (see table above) and cross referral of complex patients is part of normal practice. The department has strong sub-speciality provision and the post-holder would look to bring or develop in post a sub-speciality interest complementary to the department.

There are a number of joint clinics conducted by regional specialists and combined clinics with local adult clinicians.

Community Paediatric Services

Community paediatric and neurodisability medical services in Exeter and Eastern Devon are provided by doctors employed by Royal Devon. Collaborative working takes place with the CAMHS and Education and Social Care.

Each Paediatrician in the community team covers a geographical patch, with a degree of cross cover of cases; this allows better development of community working relationships.

Community clinics are held in Tiverton, Crediton, Cullompton, Okehampton, Exmouth and Honiton. Children from Exeter city are seen either at Royal Devon (Wonford), Royal Devon (Heavitree) or Honeylands Specialist Child Assessment Centre. Community Paediatricians provide medical assessment and management of children showing symptoms or signs that suggest a neurodevelopmental or neurodisabling condition, and the management of medical conditions associated with social, developmental or educational impairment. Those children with more significant difficulties and who attend special schools are seen in clinics delivered by the Community Paediatricians in school. There are also joint clinics with physiotherapists and orthopaedics at Vranth House School and Therapy Centre.

Children with concerns suggestive of an Autism Spectrum Disorder are assessed by the ASD assessment team, provided by Children and Family Health Devon. Paediatricians are integral to this pathway, providing opinion on differential diagnosis and assessment for medical co-morbidities. Children with suspected ADHD without co-morbid mental health needs are seen by either community paediatricians.

Emotional, mental health support and psychiatry services are led by the Child and Adolescent Mental Health Service which is provided by Children and Family Health Devon. Regular joint clinical meetings with CAMHS clinicians take place and joint clinics when necessary.

Multidisciplinary assessments for preschool children with developmental concerns take place at Honeylands Specialist Child Assessment Centre. The service is currently run by Children and Family Health Devon. Therapeutic services including Physiotherapy, Speech and Language, Occupational, and Music therapy are provided for pre-school children.

This post's primary role includes responsibility, alongside the Named Doctor, for the provision of Adoption and Fostering Medical services for Devon children, primarily those living within the Eastern Devon area. In addition, occasional assessments for children accommodated in the areas covered by peripheral Trusts may be undertaken at one of the RDUH's satellite sites. Healthcare services in this area are provided for by the One Devon ICB. The post holder will work as part of a team with medical and nursing and administration colleagues from trusts and Healthcare organisations across Devon.

Research

There is a longstanding and active research background within the Paediatric department at Royal Devon.

Exeter CF centre is one of 27 Clinical Trials Accelerator Programme (CTAP) centres in the UK CTAP clinical trials network. Financed by the UK CF Trust, this network provides 89% of the UK CF population access to clinical trials. Our CF trial co-ordinators support CF trial set up and delivery. This enables us to be an early phase centre, enabling our patient cohort to participate in national trials and so access novel therapies.

The Peninsula Medical College of Medicine and Dentistry (PCMD) and the University of Exeter Medical School (UEMS) has brought opportunities for academic and teaching development to consultants in the department. Professor Stuart Logan is Director of the Institute of Health and Research (NIHR) and is also Director of the NIHR Peninsula Collaboration for Leadership in Applied Health Research and Care (PenCLAHRC) based in Exeter. He has specific interests in evidence based child health, paediatric epidemiology and has experience of teaching postgraduate studies in Community Child Health. He also has a weekly general paediatric clinic.

Safeguarding & Child Protection

All paediatricians at the Royal Devon take part in assessments and examinations of children who may have been abused. The assessment and management of children with suspected child abuse is currently the responsibility of the Acute Bramble Consultant and team. There is no separate Child Protection rota.

Named Personnel for Safeguarding at the Royal Devon are Caroline Holt, Nurse Consultant, and Dr JP Smith, Named Doctor.

Assessment services for children with suspected sexual abuse are provided separately by an independent provider, G4S.

Social and Educational Paediatrics

All paediatricians provide reports to the local authority to assist in the assessment and support of children with additional needs. Those in the CCH team have a particular responsibility to support the learning communities and to work with public health nurses / school nurses.

Clinical Genetics

There are 7 consultant clinical geneticists who provide a Peninsula wide service from their base at the Heavitree hospital site in Exeter. The department is completed by 2 SpRs and a team of specialist clinical genetics nurses.

A DNA laboratory was established in 1995 ,in conjunction with an adult physician, Professor Andrew Hattersley, and Prof Sian Ellard, molecular geneticist.

Exeter is one of the nominated centres for the 100,000 Genome Project.

Undergraduate, Postgraduate and Continuing Medical Education and Audit

The Governance Support Unit provides support to clinicians. There are two divisional governance managers and a divisional complaints lead. Audit and risk management are discussed regularly at monthly paediatric, neonatal and community business meetings. There are monthly divisional meetings attended by lead clinicians, business managers and governance managers.

There is an active teaching programme for junior staff with a number of joint teaching activities with other directorates including the emergency department. This fulfils the RCPCH syllabus for the junior staff and contributes a robust internal CPD program for established Consultants. The RCPCH college tutor is Dr Nicola O'Shea and the year 4-5 training programme director for the peninsula is Dr Dave Bartle.

The Hospital hosts APLS, NLS, PLS and PILS courses and several consultants are instructors and course directors for these events.

The department actively participates in the delivery of undergraduate teaching of medical students from the University of Exeter Medical School (UEMS). The routine delivery of the Child Health UEMS curriculum is shared amongst departmental staff and this is reflected in the job planning process. Some consultants provide special study placements for small groups of students and some act as academic tutors, supervising the academic development of undergraduates. These activities are supported by regular training days and updates provided by UEMS staff.

4. POSITION OF DOCTORS WISHING TO WORK LESS THAN FULL-TIME

The Trust is committed to flexible working arrangements including job-sharing. Such arrangements will be discussed with any shortlisted candidate on a personal basis.

5. THE JOB ITSELF

Specialty Doctor in Acute Paediatrics

Relationships

The employer is Royal Devon. Clinical services are provided in part by block contract with NHS Devon Clinical Commissioning Group. Key working relationships will be the staff and health professionals working within Integrated Children's Services (Child and Family Health Devon).

Duties of the post:

Clinical commitments:

This is a new substantive 8PA role within the Paediatric team based at the Wonford Hospital site in Exeter. The post holder will support the development of a Paediatrics Rapid Access Clinic (RAC) to improve urgent and emergency care offered to children who attend the Emergency Department or are referred to Paediatrics by Primary Care. The clinical role includes the delivery of twice weekly Rapid Access Clinics, contribution to the senior Paediatric Assessment Unit (PAU) rota during the week and at weekends, and non-urgent child protection medical assessments. The post holder will play a key role in developing the RAC service, including guidance and pathways needed to improve the care that is provided for children with acute presentations. They will be supported by the Paediatrics Consultants and the Management team in order to establish the RAC model.

Education and Training

The post-holder will be expected to participate in junior staff education. They will be enrolled with the RCPCH for CPD and undertake appraisal as per Trust policy.

University of Exeter Medical School

Royal Devon is one of the NHS partners of the UEMS. It is expected that the post-holder will contribute to the delivery of the teaching as per job plan. Flexibility exists within this allocation and changes can be made by mutual agreement with the Lead Clinician within the Trust's annual job planning and appraisal process.

Clinical Audit & Research

To contribute to the development of Clinical Quality Standards through service development and appraisals of service delivery. The successful candidate will be expected to participate in the design and completion of audit projects leading to improvements in practice.

Administration

The appointee will undertake administrative duties associated with the running of his/her clinical work with the support of their secretary.

Management

The appointee will be responsible to the Lead clinician and Associate Medical Director for the effective and efficient use of resources under his/her control, to contribute to the planning and development of the service and to participate in directorate/departmental meetings.

Professional Performance

It is a requirement that if the employee has concerns about the professional performance of a member of the medical staff, they have a duty to speak to the person concerned. If the matter is potentially serious, or satisfaction is not obtained with the direct approach, such concerns should be discussed with the lead clinician; if satisfaction is again not obtained, concerns should be discussed with the Associate medical director or Medical Director.

The department is committed to ensuring that consultant job plans meet the needs of the service as well as the individual. Job plans are subject to annual reviews to achieve these aims.

Infection Control

All medical and dental staff have a duty to practice safe medicine in relation to infection control and other issues. Appointees will therefore be expected to attend infection control learning opportunities once per year as a minimum, and also to comply with Trust Infection Control policies and guidelines.

Staff and office

The appointee will have shared office accommodation, secretarial support and access to his/her own PC and the Internet.

Leave

Annual and study leave will be granted to the maximum extent allowable by the Medical & Dental Whitley Council regulations in accordance with the Trust's leave policy. The post holder will coordinate leave with the other consultants as per departmental policy.

Supporting Activity Time (SPAs).

Core SPA activity should comprise of activities necessary for appraisal, revalidation and to keep up to date with contemporary clinical practice. This should include mandatory training, personal clinical audit and performance review and participation in divisional audit, governance and departmental meetings.

Additional SPA activity such as educational supervision to allocated trainees and the support research activity will attract additional SPAs on an individual basis in line with Trust Policy.

6. TIMETABLE

Job planning is based on an annualised contract based on 42 weeks. The 42 weeks takes into consideration annual, study and professional leave requirements. Over a 12 month period (42 weeks) the post holder will provide the following number of commitments:

| | |
|---|---|
| Total PAs / week: | 8 |
| Direct Clinical Contact (DCC): | 7 |
| Supporting Professional Activities (SPA): | 1 |

7. CONDITIONS OF SERVICE

Salary Scale **£TBC**

Annual Leave

Pro-rata 32 days (6 weeks + 2 days) per year (+day off in lieu for each Public Holiday worked)

Study leave

Pro-rata 30 working days over period of three years.

8. ACADEMIC FACILITIES

The Peninsula Medical School / Exeter Medical School

The Peninsula College of Medicine and Dentistry (PCMD) was founded on a unique partnership between the Universities of Exeter and Plymouth and the NHS within Devon and Cornwall. The Peninsula Medical School was established in August 2000 and began delivery of the Undergraduate BMBS Programme in autumn 2002. Changes in governance of PCMD led to the establishment of two new medical schools, the University of Exeter Medical School (UEMS) based in Exeter, with the Plymouth University Peninsula School of Medicine, based in Plymouth.

The University of Exeter Medical School (<http://medicine.exeter.ac.uk/>) exemplifies the best of the Peninsula Medical School and combines it with the University of Exeter's outstanding global reputation for academic excellence and student experience. UEMS operates across the South West giving students the choice of living and working in locations such as Exeter, Torbay, Barnstaple and Truro, experiencing the best of Devon and Cornwall healthcare services.

UEMS builds on Peninsula's highly regarded innovative curricula of the Bachelor of Medicine, Bachelor of Surgery (BMBS) and the BSc Medical Science degrees to produce doctors and clinical scientists who are able to address the health and social care challenges of the 21st century. The BMBS curriculum provides a clinical focus that is innovative and meets the need of students who want to work as doctors in an increasingly integrated, internationalised health environment. UEMS also offers postgraduate taught and research degrees.

Undergraduate medical student teaching is consultant-led and it is anticipated that the successful candidate will share an equal part of the teaching and will be encouraged to be actively involved in the paediatric department's contribution to the medical school. This activity will be reflected in job plans.

Years one and two of the Bachelor of Medicine, Bachelor of Surgery degree programme lay the scientific foundations for the future years of the course. Students are introduced to clinical methods and begin acquisition of a range of transferable skills, learning science within a clinical context. The programme reflects the belief that doctors must adopt a socially accountable approach to their work and understand the human and societal impact of disease. The curriculum is structured around the human life cycle and the first year student studies human physical and psychological development from birth through to death. 70% is "core", providing the knowledge and abilities essential for entry into Foundation Programme and 30% comprises Special Study Units, which allow students to select areas of interest to study in depth. In Year 2 students revisit the human life cycle, this time with an emphasis on disease and the pathological and psychological impact of illness. The programme then moves away from the traditional curriculum model to reflect today's evolving models of care. Learning is patient centred and, using so-called 'Pathways of Care', Years 3 and 4 reflect the patient experience of care in acute, primary and community care settings. In year five students learn the job of medicine and develop their understanding of principles of practice in the NHS. Students are involved in a series of apprenticeship attachments to consultants across the South West and to Principal General Practitioners on a one-to-one basis throughout Devon and Cornwall. The paediatric department is involved in all years of the programme.

9. RESEARCH

All research undertaken must comply with Trust policy on Research & Development. Trust policy and guidelines are available on the Trust's Intranet site and specific compliance with the Research Governance Framework for Health and Social Care.

The Trust holds a Department of Health contract to host a peninsula-wide Research and Development Support Unit encouraging Evidence Based Practice in the research community. This Peninsula Unit, formed from three highly successful units, involves networks throughout the peninsula and supports all professional groups in both primary care and secondary care.

10. CANVASSING

Candidates are asked to note that canvassing of any member of the Advisory Appointments Committee will disqualify {see Statutory Instrument 1982 No. 276 paragraph 8(1)(b)}. This should not deter candidates from seeking further information relevant to the post from those members of the Trust detailed below and, further, this should not deter candidates from making informal visits to the Trust which are encouraged.

11. ACCESS TO CHILDREN AND VULNERABLE ADULTS

The person appointed to this post may have substantial access to children and to vulnerable adults. Applicants are therefore advised that in the event that your appointment is recommended and in line with Trust policy, you will be asked to undertake a disclosure check and a POCA (Protection of Children) list check with the CRB prior to commencement of employment. Refusal to do so could prevent further consideration of the application. Attention is drawn to the provisions of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 as amended by the Rehabilitation of Offenders Act 1974 (Exceptions)(Amendment) Order 1986, which allow convictions that are spent to be disclosed for this purpose by the police and to be taken into account in deciding whether to engage an applicant.

12. REHABILITATION OF OFFENDERS

This post is not protected by the Rehabilitation of Offenders Act, 1974. You must disclose all information about all convictions (if any) in a Court of Law, no matter when they occurred. This information will be treated in the strictest confidence.

13. DATA PROTECTION ACT 1998

Candidates are informed that the information given by them in application for the post will be used only for the recruitment and selection process. For successful candidates this will then form part of their personal file, and for unsuccessful candidates the information will be destroyed. The information is stored both in hard copy form and minimally on a database. This information is held and administered in line with the Data Protection Act and the Trust's confidentiality procedure.

14. FURTHER INFORMATION

The Trust welcomes informal enquiries; the relevant people to speak to are:

Clinical Director Paediatrics: Dr Simon Parke
Consultant Paediatrician
Royal Devon University Healthcare NHS Foundation Trust
Barrack Road, Exeter.
EX2 5DW.
Tel: 01392 402685
E-mail: simon.parke@nhs.net

Care Group Director: Mrs Natalie Wickins
Care Group Director
Centre for Women's Health
Royal Devon University Healthcare NHS Foundation Trust
Barrack Road, Exeter.
EX2 5DW
Tel: 01392 406515